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7390 02/08/2006

TERRY T MOYER
P O BOX 1927
SPARTANBURG, SC 29304

03/27/2006 MAHMED2 00000032 08863113

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HEIDI M. LEWIS	(Depositor's name)
Heidi M. Lewis	(Signature)
March 21, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
08/863,113	05/27/1997	ANDRE M. GOINEAU	1974	4347

TITLE OF INVENTION: METHOD TO PRODUCE IMPROVED POLYMERIC YARN

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	05/08/2006
EXAMINER	ART UNIT		CLASS-SUBCLASS		
WORRELL JR, LARRY D	3765		028-240000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <p><input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</p> <p><input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</p>	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
	1. <u>Terry T. Moyer</u> 2. _____ 3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

MILLIKEN & COMPANY

Spartanburg, SC

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-0500 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Sara M. Current

Date 3/14/06

Typed or printed name Sara M. Current

Registration No. 38,057

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Serial No.: 08/863,113
Inventor(s): Goineau et al.

U.S. PTO Customer No. 25280
Case No.: 1974

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Goineau et al.

Serial Number: 08/863,113

Filed: May 27, 1997

Title: IMPROVED POLYMERIC YARN

Group Art Unit: 3765

Examiner: Worrell, Jr., Larry D.

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

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I hereby certify that this correspondence, and all correspondence referenced herein as being enclosed with this correspondence, is being deposited with the United States Postal Service in an envelope addressed to "Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" with sufficient postage on the date listed below:

Check #: 441675 Amount: \$ 1,400.00

Date: March 21, 2006

Name: Heidi M. Lewis

Signature: *Heidi M. Lewis*

RESPONSE TO NOTICE OF ALLOWANCE AND FEE(S) DUE

In response to the Notice of Publication Fee Due, dated February 8, 2006, attached is a copy of the Notice and Check # 441675 in the amount of \$1,400.00. Please charge any deficiency thereof to Deposit Account 04-0500. A duplicate copy of this sheet is enclosed.

Respectfully requested,

Sara M. Current
Sara M. Current
Attorney for Applicants
Reg. No. 38,057

MILLIKEN & COMPANY, M-495
920 Milliken Road
P.O. Box 1926
Spartanburg, SC 29304
Telephone: (864) 503-1596
Facsimile: (864) 503-1999